

PAYMENT INFORMATION

Texas Department of Public Safety Regulatory Services Division

www.dps.texas.gov

• MUST USE MOST CURRENT FORM

• PRINT CLEARLY IN BLACK INK

• MAKE SURE ENTIRE CIRCLE IS FILLED

Ignition Interlock Device

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EXAMPLE:

	No
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Application for Certification of Ignition Interlock Device Vendor

NOTE: Application will not be processed without the required \$450.00 fee. Please include

payment with this application.							
Type of Vendor Application: O Original	pe of Vendor Application: O Original Re-Inspection O			$\hat{\mathbb{L}}$ The above space is reserved for office use only $\hat{\mathbb{J}}$			
PART I. VENDOR INFORMATION							
Business							
Name: Business							
Physical Address (No PO Box):							
City:	State (2- Letter Code):	ZIP:		Phone Number:	()		
Fax Number: ()	Email Address	S:					
Business Mailing Address (if different from physical address):							
City:			State (2- Letter Code):		ZIP:		
Printed First Name Printed Last Non Business Manager: Printed Last Non Business Manager:							
Business Manager Phone Number: ()	Business Manager Ema	Business Manager Email:					
Printed First Name of Business Owner:			Printed Last Name of Business Owner:				
Business Owner Phone Number: ()	Business Owr Email:						
PART II. AGREEMENT AND AFFIRMATION I verify the information provided is true and correct, and I understand any required fee is non-refundable. I also understand this is an official government record and any missing information and/or false statement made on this document or any other supplement provided to DPS may result in criminal prosecution. Signature of the applicant or authorized individual further grants the director or his designee, the right to enter and to inspect the premises or any records required to be kept by Texas Law and Department rule. Furthermore, I understand I must install, sell, service, and or monitor Ignition Interlock Devices approved by the Texas Department of Public Safety and adhere to manufacture's specifications.							
Manager Signature							
Owner Signature (if different from Manager)					Date//		

This form and attachments can be forwarded by mail to:

Texas Department of Public Safety
Ignition Interlock Device
PO Box 15999
Austin, TX 78761-5999

Privacy Policy Sec. 559.003. RIGHT TO NOTICE ABOUT CERTAIN INFORMATION LAWS AND PRACTICES (a) Each state governmental body that collects information about an individual by means of a form that the individual completes and files with the governmental body in a paper format or in an electronic format on an Internet site shall prominently state, on the paper form and prominently post on the Internet site in connection with the electronic form, that: (1) with few exceptions, the individual is entitled on request to be informed about the information that the state governmental body collects about the individual; (2) under Sections 552.021 and 552.023 of the Government Code, the individual is entitled to receive and review the information; and (3) under Section 559.004 of the Government Code, the individual is entitled to have the state governmental body correct information about the individual that is incorrect. (b) Each state governmental body that collects information about an individual by means of an Internet site or that collects information about the computer network location or identity of a user of the Internet site shall prominently post on the Internet site what information is being collected through the site about the individual or about the computer network location or identity of a user of the site, including what information is being collected

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